



**ABSENTEE BALLOT
SECURITY ENVELOPE
FOR ABSENTEE BALLOT VOTED IN PERSON OR
DELIVERED BY TRAVELING BOARD**

(ABS-7)

State Form 49137 (R7 / 11-14)

Indiana Election Commission; (IC 3-11-10-24, 25, 29)

I, (Attach voter address label here or print voter name and address below)

Affirm under the penalties for perjury that the following is true:

I RESIDE AT THE ABOVE ADDRESS AND AM ENTITLED TO VOTE IN THE ABOVE
PRECINCT / WARD / TOWNSHIP **OR**

I AM ENTITLED TO VOTE AN ABSENTEE BALLOT IN THE PRECINCT WHERE
I FORMERLY RESIDED UNDER IC 3-10-10; 3-10-11 OR 3-10-12 IN THE ABOVE
PRECINCT / WARD / TOWNSHIP IN THE STATE OF INDIANA (AND THE
REQUIRED VRG-4/12 FORM IS ATTACHED)

at the ☐ PRIMARY ☐ GENERAL ☐ MUNICIPAL ☐ SPECIAL ELECTION
to be held on

(Insert date of election.)

I also affirm under the penalties of perjury each of the following: I have personally marked
the enclosed ballot in secret and have enclosed it in this envelope and sealed it without
exhibiting the ballot to any other person.

X Signature of voter

_____/_____/20_____
Date signed (mm/dd/yy)

ABSENTEE BOARD MEMBER STATEMENTS

(Check the boxes which apply, and then sign and print both names.)

☐ We are the absentee voter board members who accepted the completed
absentee ballot from this voter, who appeared in person before us;

OR

☐ We serve as a traveling board, and are the absentee voter board members who
accepted the completed absentee ballot from this voter, whom we visited in the
manner authorized under state law (IC 3-11-10-25(b)); and

☐ If applicable, state that This voter was a voter with disabilities who was unable to
make a voting mark on the ballot or sign the secrecy envelope.

1. X Signature of absentee voter board member

Printed name of absentee voter board member

2. X Signature of absentee voter board member

Printed name of absentee voter board member